

INCIDENT SAFETY OFFICER: FIRE SUPPRESSION

The certification to this level will require the following:

- Step 1- Fulfill the examination entrance criteria
- Step 2- Submission and acceptance of an application, training affidavit, and certification fee by the deadline date.
- Step 3- Successful completion of a written examination.

STEP ONE- EXAMINATION ENTRANCE CRITERIA

Examination entrance criteria for this level is the following:

- 1- At least 18 years of age at the time of the examination.
- 2- Possess a high school diploma or GED at the time of the examination.
- 3- Be a member of the Massachusetts fire service.
- 4- At least 16 hours of Incident Safety Officer (ISO) specific training. Training shall include an ISO program and may be augmented with other programs to reach the minimum training hours. Training shall be documented on the attached affidavit.
- 5- Certified to the minimum level of Fire Officer I by the Massachusetts Fire Training Council OR received reciprocal credit from either the National Board on Fire Service Professional Qualifications, Inc. OR the International Fire Service Accreditation Congress.

STEP TWO- APPLICATION PROCEDURE

The application, training affidavit, and certification fee must be submitted and received at the Massachusetts Firefighting Academy no later than the deadline date noted in the examination schedule. The certification fee must be in the form of a personal check, bank draft, money order, municipal check, or municipal purchase order made to the order of the Massachusetts Firefighting Academy Trust Fund. All others will be rejected. Upon acceptance, the candidate will be assigned to the examination date requested on the application. All applicants will be notified by email and if accepted will be supplied with all examination procedures.

American with Disabilities Act (ADA) – The Massachusetts Fire Training Council will make every attempt to meet the needs of persons with disabilities and taking certification examinations. If you request accommodations (by checking the box on your certification application) please immediately contact the DFS Civil Rights Officer, Mary Travers at (978) 567-3145, to determine accommodations you may receive. Candidates who have received accommodations in the past must also contact Ms. Travers to determine if any additional documentation is required. Each request will be handled confidentially.

STEP THREE- WRITTEN EXAMINATION

This section will consist of 100 multiple choice questions given in a 120 minute period designed to examine the knowledge of basic skills required by NFPA Standard 1521 for Incident Safety Officer: Fire Suppression, 2008 edition.

The reference from which the questions for this written examination will be drawn is the following.

Fire Department Safety Officer, first edition, Fire Protection Publications. (IFSTA)

SAMPLE QUESTIONS

The following are sample questions to represent most of the **type** of questions a candidate will be asked to answer during the written examination.

1. For a candidate for this level of certification to be successful, he or she must do the following.

- A. Take the examination process seriously.
- B. Read all documentation carefully.
- C. Study all references and applicable skill sheets closely.
- D. All of the above.

2. This leadership style has a moderate concern for production and for people?

- A. Single-issue.
- B. Middle-of-the-road.
- C. Direct-issue.
- D. Bureaucratic.

3. Long-range plans and goals...

- A. extend for periods of time up to twenty years.
- B. attempt to anticipate how the department will best serve the community.
- C. Both A and B
- D. might indicate the need for a new fire station within six months.

4. A method of solving problems is called the...

- A. four-step process.
- B. five-step process.
- C. six-step process.
- D. eight-step process.

ANSWERS

1. D 2. B 3. C 4. D

PASS/FAIL CRITERIA:

Candidates must achieve at least a 70% on this examination to receive a passing score leading to certification.

IMPORTANT NOTE: All portions of this certification level must be completed within twelve months from the initial exam date. After twelve months, candidates will be required to reapply for certification as a new candidate for this level.

MASSACHUSETTS FIRE TRAINING COUNCIL

Certification Examination Application

SECTION 1 - EXAMINATION DATA

Examination: INCIDENT SAFETY OFFICER: FIRE SUPPRESSION

If you are taking this examination for the first time, check below.

☐ Full Examination

Any retake of portion(s) of this examination, check the appropriate box(s) below.

☐ Written Only

☐ Practical Only

Examination Date: _____ Location: _____

IMPORTANT: THIS LEVEL WILL NOT BE OFFERED AFTER NOVEMBER 19, 2016 AS IT IS WILL BE UNDER REACCREDITATION REVIEW.

Americans with Disabilities Act (ADA) accommodations requested. Check Box ☐

SECTION 2 - APPLICANT DATA

Enter the following information. Name will appear on your certificate as it is printed below.

Last Name: _____ First Name: _____ Middle Initial: _____

Mailing Address: _____
Street or Post Office Box City State Zip

Telephone: Home (_____) _____ Work (_____) _____ Last 4 digits of SS # _____

This is a new address and/or phone numbers. Check box. ☐ Email: _____

SECTION 3 - FIRE SERVICE AFFILIATION

I am a member of one or more of the following:

- ☐ A municipal fire department in the Commonwealth of Massachusetts, compensated or uncompensated, active or retired.
- ☐ A non-municipal organization whose sole function is to provide services equivalent to a municipal fire department to a municipality in the Commonwealth of Massachusetts, compensated or uncompensated, active or retired.
- ☐ Full-time employees of the Massachusetts Department of Fire Services; Massachusetts Department of Environmental Management; Massachusetts Port Authority; and the University of Massachusetts, Amherst; active or retired.*
*Full-time employees of the Department of Fire Services are defined as those full-time employees in the Haz-Mat Division, the Division of Fire Safety, and the Firefighting Academy. State Police personnel assigned to the Fire and Explosion Investigation Unit and the Hazardous Devices Unit are not considered full-time employees of the Department of Fire Services.
- ☐ Full-time, civilian (non-military) members of military fire departments on installations which are located within the Commonwealth of Massachusetts.

Current Department or Organization Name: _____

Appointment Date: _____

SECTION 4 - ENTRANCE CRITERIA

Enter examination prerequisite(s), if appropriate. Example: Firefighter I/II, Fire Instructor I, MFA Recruit Program Graduate, MFA Call/Volunteer Program Graduate, Fire Instructor I or II Training Programs, etc..

Prerequisite Level of Certification: _____ Date Granted: _____

Prerequisite Level of Certification: _____ Date Granted: _____

Prerequisite Training Program: _____ Date Completed: _____

SECTION 5 - MISCELLANEOUS

Check the appropriate box below, complete and enclose the information requested.

☐ Training Affidavit Completed and Enclosed

SECTION 6 - APPLICANT CONFIRMATION

I, the applicant, by my signature below, attest that all of the above information is true, I am at least 18 years of age, and I possess a high school diploma or GED.

Signature: _____ Date: _____

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The applicant will be notified by Email regarding their acceptance into this examination after the examination application deadline date has passed.

Note: The Training Council has an appeal process and fraud/misrepresentation policy. Visit the certification “Frequently Asked Questions” section of their website for details. (www.mass.gov/dfs)

SECTION 7 – CERTIFICATION FEE

The \$30.00 certification fee must be in the form of a personal check, money order, bank draft, municipal purchase order, or municipal check to the order of the **MASSACHUSETTS FIREFIGHTING ACADEMY TRUST FUND. Note: Cash cannot be accepted.**

Please indicate the form of payment enclosed.

☐ Personal Check ☐ Bank draft ☐ Money Order ☐ Municipal Check ☐ Municipal Purchase Order

Submit this application, any accompanying documentation, and the \$30.00 certification fee to:

**Certification Examination
Massachusetts Fire Training Council
P.O. Box 1025
Stow, MA 01775**

This application, accompanying documentation and certification fee **MUST** be received at the above address no later than the close of business on the deadline date as listed in the examination schedule.

Please note: There will be a \$15.00 charge for bounced checks per 801 CMR 408.

Certification examination results will be withheld until all certification fees and surcharges (ex. bounced check fees) are paid in full.

Incomplete applications will be returned.

NAME _____ Last 4 digits of SS# _____

MASSACHUSETTS FIRE TRAINING COUNCIL

PREREQUISITE TRAINING AFFIDAVIT FOR INCIDENT SAFETY OFFICER: FIRE SUPPRESSION CERTIFICATION

I attest that _____ has received at least 16 hours of
_____ documented Incident Safety Officer
(candidate's name) specific training.**

(ISO Program attended) (Date) # of hours

(Program attended) (Date) # of hours

(Program attended) (Date) # of hours

(Program attended) (Date) # of hours

Total number of hours. Shall be at least 16. _____

Signature:

Chief of Department or Training Officer * _____ Date: _____

* I understand my signature above is governed by the Fraudulent Misrepresentation Policy of the Massachusetts Fire Training Council.

** Documented training includes, but is not limited to, programs conducted by the Massachusetts Firefighting Academy, the National Fire Academy, or any other recognized training institution.